OneSight
IT Operations

Muscle Balance

Clinic Operations

User Guide

ONESIGHT

EssilorLuxottica Foundation

Overview

This document will go over the process of using the iPad at the Muscle Balance station on clinic. It's important to note that this application can **ONLY** be accessed by an OD.

Muscle Balance

Once you have searched for the patient you will be brought to the Muscle Balance page. The first section is "Patient Information" and has the following fields.

CID – The clinic ID number for this specific patient.

Name – First and last name of patient.

DOB – The patient's date of birth in MM/DD/YYYY format.

Group – The school, group, or community the patient is with.

Photo – Consent to media consent or not.

Allergies – Any allergies will be listed here.

 Please confirm their first and last name, date of birth, as well as any allergies. This is a very important step so please don't forget!

Muscle Balance

Patient Information	Active User: _TRAIN_	_-- Logout --_
CID: **253017**	_Name:_ **Test, Test**	
DOB: **5/16/2007**	_Glasses:_ **Yes Prior within a year**	
Group: **TEst**		
PHOTO: **Yes**	_ALLERGIES:_ **Latex**	

The next section is labelled "Health History" and has the following fields.

Glaucoma – Answer taken from patient registration.

Diabetes – Answer taken from patient registration.

Hypertension – Answer taken from patient registration.

Cataracts – Answer taken from patient registration.

Macular – Answer taken from patient registration.

Worn Glasses Prior – Answer taken from patient registration.

Medications – Answer taken from patient registration.

Allergies – Answer taken from patient registration.

Please confirm all of this is accurate and then you can move on to the next section.

Health History

Glacoma:	Diabetes	Hypertension	Cataracts	Macular
Unknown	Unknown	Unknown	Unknown	Unknown

Worn Glasses Prior:

Yes Prior within a year

Medications

Allergies

Latex

The next section is "Muscle Test Details" and has the following fields.

Cover Test or Phoropter – Select if a cover test was done or if a phoropter was used.

H Ortho – Check the box if applicable.

V Ortho – Check the box if applicable.

EOM From/Smooth – Check the box if applicable.

Pupils: PERRL-APD – Check the box if applicable.

There is a yellow button labelled "ALL NAP" next to these fields. If you click this button it will check all the boxes for H Ortho, V Ortho, EOM From/Smooth, and Pupils: PERRL-APD.

ESO EXO – Select the option for ESO or EXO.

Hypo Hyper – Select the option for Hypo or Hyper.

Exam Notes – Describe anything found during the exam.

The next section is for "Notes." Here you can enter any notes that you would like to from the Muscle Balance station. These notes are for medical comments only so keep personal opinions and comments out. Below this, you will select "Muscle Balance" as the patient status. Set the patient test date and click on "Update" at the bottom of the screen. This will take you back to the search screen and you can move on to the next patient!